PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10623432

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN	
TOTAL CLAIMS			41					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			A minus 20≠		* 21			X\$ 9=	1894	9 0	<i>)</i> X\$18=	
INDEPENDENT CLAIMS			14 mil	nus 3 =	* //			X42 =	462	OR	√X84=	
MULTIPLE DEPENDENT CLAIM PRÉSENT					· · · · · · · · · · · · · · · · · · ·			+140=	700	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in colu						olumn 2	,	TOTAL	1026	OF	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
(Column 1)				(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ***			=		X42=		OR	X84=	
L_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENI	CLAIM		J	+140=		OR	+280=	
					TOTAL		OR	TOTAL ADDIT. FEE				
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE			ADDII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	<u> </u>	-	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		_										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***			$\ \ $	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UN		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	`
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE												
		ber Previously Pa					er fo	end in the and	vooriate ho	c in co	lumo 1	